

Tennessee Ethics Commission

2009

CHECK THE APPLICABLE BOXES	
<input type="checkbox"/> Form Completed by Individual RECEIVING Fee	<input type="checkbox"/> Form Completed by Individual/Entity PAYING Fee
<input checked="" type="checkbox"/> New Disclosure Form	<input type="checkbox"/> Quarterly Update (Provide date previous Disclosure Form submitted: _____)
DISCLOSURE OF INDIVIDUAL RECEIVING FEE	
a. First and last name of individual receiving fee <i>NONE</i>	b. Position or Title of individual
c. Mailing or street address (room, apt., suite no. and street, or P.O. box)	
d. City, state, zip code	
e. Telephone	f. E-mail (if available)
DISCLOSURE OF PAYOR	
a. Name of individual or entity paying fee <i>NONE</i>	
b. If different from above, name of individual submitting form on behalf of entity	
c. Mailing or street address of Payor (room, apt., suite no. and street, or P.O. box)	
d. City, state, zip code	
e. Telephone	f. E-mail (if available)
DISCLOSURE OF CONTRACT AND COMPENSATION	
a. Date of Contract <i>NONE</i>	b. Amount of Fee <i>NONE</i>
c. Date(s) Services Rendered	
d. General Description of Services Rendered	

RECEIVED
2009 FEB -3 PM 2:
TENNESSEE
ETHNICS COMMISSION

AFFIDAVIT

By my signature below I attest to the following:

- I understand that, pursuant to T.C.A. §§2-10-125 & 126, submitting a Sworn Disclosure of Consulting Services form which contains false information may subject me to the penalties of perjury;
- The information contained in this Sworn Disclosure of Consulting Services form is true and correct to the best of my knowledge, information and belief.

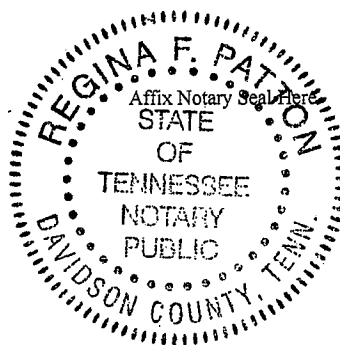
Gary W. Moore
Signature

1-30-07
Date

Sworn to and subscribed before me this 30th day of Jan. in Sevier county,
Tennessee:

Regina F. Patton
Signature of Notary

Notary Registration No.



My Commission Expires JULY 5, 2011